



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Scott Baggs

Serial No.: 09/885,900

Filed: June 20, 2001

For: SPACE SAVING FLATBED SCANNER

Confirmation No.: 4858

Group Art Unit: 2878

Examiner: Yam, Stephen K.

Docket No. 10004919-1

PRELIMINARY AMENDMENT AND REMARKS WITH RCE

Mail Stop: RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The final Office Action mailed December 19, 2003 (Paper No. 1203) has been carefully considered. In response, please accept the Request for Continued Examination under 37 CFR 1.114, enter the following amendments, and consider the following remarks.

Amendments to the Claims are reflected in the listing beginning on page 3 of this paper.

Remarks begin on page 16 of this paper.

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service, as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on 3/11/2004.

08/24/2004 TBELL2 0000003 082025 09885900

01 FC:1202 54.00 DA

02 FC:1201 86.00 DA

Signature

/17/2004 SFELEKE1 0000001 082025 09885900

FC:1201 344.00 DA

FC:1202 630.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

9/885 900

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL		OR TOTAL	

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 77	Minus	** 39 = 38
Independent	* 10	Minus	*** 5	= 5
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

SMALL ENTITY OR OTHER THAN
OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	54.00
X43=		OR X86=	816.00
+145=		+290=	
TOTAL ADDIT FEE		OR TOTAL ADDIT FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		+290=	
TOTAL ADDIT FEE		OR TOTAL ADDIT FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		+290=	
TOTAL ADDIT FEE		OR TOTAL ADDIT FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.